L21000160354

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

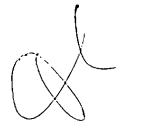




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2022 SEP 13 PH 12: 51



COVER LETTER

• ,. • .,

TO: Registration Section Division of Corporations		
SUBJECT: Arcan Sunrise [] (Name of Limite	ed Liability Company)	
The enclosed member, resignation or dissociate	tion and fee(s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to:	
Mariette Toribio (Contact Person)		
(Contact Person)		
Brick Business Law		
3413 W. Pict-cher Ave		
Tampa PL 35618 (City/State and Zip Code)		
For further information concerning this matter	r, please call:	
(Name of Contact Person)	at (813) 810.1816 × 20 20 20 20 20 20 20 20	į
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$\Begin{align*} \text{Street Address:} \text{Street Address:} \text{Street Address:} \text{Street Address:}	
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

the Flor	rida Dena	rtment
1. The name of the limited liability company as it appears on the records of the Flor	ida Depai	· CITIOIT
of State is: (IPPM SUMMSE		·
2. The Florida document/registration number assigned to this limited liability comp	any is:	
L21000160354		
3. The date this member/manager withdrew/resigned or will withdraw/resign is:	8-15	- Z
4. I, Jodi Scholes , hereby withdraw/resign as a (Print Name of Person Resigning)		
Darther.		
(Print Title) of this limited liability company and affirm the limited liability company has bee	n notified	of my
resignation in writing.		
Signature of Dissociating Member or Resigning Manager	2022 SEP 3	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	PH 12:	
•	Ω	